Substitute for Form PTO-87.5								Approved for use through 7/31/2008. OMB 065/ Idemark Office; U.S. DEPARTMENT OF COMM mation unless it displays a valid OMB control nu Application or Docket Number			
	CLAIN	CLAIMS AS FILED - P, (Column 1)		Γ (Column 2)		SMALL ENTITY			OR	OTHER THAN	
FOR BASIC FEE (37 CFR 1.18(a))		NUMBER FILED		NUMBER EXTRA		RATE				SMALLENTITY	
TOTAL CLAIMS (37 CFR 1.16(c))							FEE		00	RATE	FEE
INDEPENDENT ( (37 CFR 1.16(b))	CLAIMS	minus 20				\$=			OR X	<b>.</b> =	+
MULTIPLE DEPE	NOENT CLAIM PE		us 3 ≈ .		1/4	=			OR X		<del> </del>
f the difference									OR +	<u> </u>	<del>                                     </del>
*.	CLAIMS AS			•		TOTAL .			R	TOTAL	
	(Column 1	· . )	(Colum		n		. • •	•			
<b>∀</b>	CLAIMS REMAININ AFTER	G .	HIGHES	R PRESENT	7	SMALL I		<b>7</b> .	R .	OTHER SMALL I	THAN ENTITY
Total (37 CFR 1.16(c))	AMENDME!	VT Minu	PREVIOU PAID FO	SLY EXTRA		· · ·	ADDI- TIONAL FEE		. R	RATE .	ADDI- TIONAL
Total (37 CFR 1.16(c))  Independent (37 CFR 1.16(b))	4	Minu	s 5	7 -	_ X \$_	=		OR	X \$		FEE
FIRST PRESEN	ITATION OF MULT	IPLE DEPE	IDENT CLAIM (3	07 CFR 1.16(d))	× \$_	= =		OR	× \$	=======================================	
•					TOTA ADD'	L FEE		OR	+ s_	=	
	. (Calumn 1) CLAIMS	1	(Column HIGHEST	2) (Column 3)				.OR	ADD'L	FEE _	
Total	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL		RA	TE	ADDI-
Total (37 CFR 1.16(c)) Independent		Minus	· · · · · · · · · · · · · · · · · · ·	=	. X \$		FEE				TIONAL
(37 CFR 1.16(b))	<u> </u>	Minus		=	X \$	== -	<del></del>	OR	× 1	==	
FIRST PRESENT	ATION OF MULTIP	E DEPEND	ENT CLAIM (37	CFR'1.16(d))	+ \$	_=		OR OR	X \$	==	
	(Column 1)	•	•		TOTAL ADD'L I			OR OR	TOTAL ADD'L F	==	
	CLAIMS REMAINING AFTER		(Column 2) HIGHEST NUMBER PREVIOUSLY	(Column 3) PRESENT	RATE		ADDI-				
Total- (37 CFR 1.16(c))	AMENDMENT	Minus	PAID FOR	EXTRA		T	IONAL FEE		RATE	Ť	ADDI- IONAL
ndependent 37 CFR.1.16(b))		Minus	414	=	X \$	=		OR	X. \$		FEE
IRST PRESENTAT	ON OF MULTIPLE	DEPENDEN	IT CLAIM (37 CE	R 1 16(d))	× ŧ	=		ÖR .	× \$	=	
		,			TOTAL	=		OR L	+. \$	=	
the entry in column the "Highest Nur the "Highest Number "Highest Number Number Inc."	nn 1 is less than	the entry is	Column 2 well	e "0" in column 3. s less than 20, ent	ADD'L FE	Ε		OR .	TOTAL. ADD'L FEI	_	

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to lake 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of lime you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.